



Kansas Department of Health and Environment

Long Term Care Program

FACT SHEET

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L PLEASE ROUTE THIS *Fact Sheet* TO NURSING STAFF AND OTHER INTERESTED PARTIES IN YOUR FACILITY. THIS PUBLICATION MAY BE COPIED OR ACCESSED THROUGH THE INTERNET ADDRESS ABOVE.

The Long Term Care Program Fact Sheet is a newsletter published by the Kansas Department of Health and Environment and sent quarterly to all nursing facilities, long term care units in hospitals, critical access hospitals, intermediate care facilities for the mentally retarded and nursing facilities for mental health. This newsletter provides important up-to-date information concerning the nursing facility industry.

Semi-Annual Report and Statistical Report

Enclosed with this Fact Sheet is the Long Term Care Semi-Annual Report for the 6 month reporting period of July 1 through December 31, 2000. **THE DEADLINE FOR FILING THIS REPORT IS JANUARY 19, 2001.** This report shall be filed with the Bureau of Health Facilities, Kansas Department of Health and Environment. All **NURSING FACILITIES, ASSISTED LIVING FACILITIES, RESIDENTIAL HEALTH CARE FACILITIES, NURSING FACILITIES FOR MENTAL HEALTH, and INTERMEDIATE CARE FACILITIES FOR THE MENTALLY RETARDED** are required to complete this report by indicating resident and employee data for the six month period July 1- December 31, 2000. Also enclosed is the Resident Statistical Report, reporting period ending December 31, 2000.

Refer questions regarding either of these forms to Sandra Dickison, Long Term Care Program, Bureau of Health Facilities, (785) 296-1245.

The *Fact Sheet* is published by the Kansas Department of Health and Environment.

Bill Graves, Governor
Clyde Graeber, Secretary
Bureau of Health Facilities
900 SW Jackson, Suite 1001
Landon State Office Building
Topeka, Kansas 66612-1220

Assisting Residents at Meal Time

One the most frequent problems identified to this agency by staff in nursing facilities is the difficulty of having enough staff available to assist residents during mealtime. Eating is one the most complex physiological functions. For some residents, mealtime is the most dangerous time during the day. The residents at the greatest risk are those who are fed by another person.

Employees of a facility who feed residents by placing food in the resident's mouth must be licensed health care professionals or nurse aides. Licensed nurses are responsible for assessing and planning interventions for these residents which diminish the likelihood of aspiration. These interventions should be recorded in the care plan and be consistently used whenever food and drink are offered. State and federal regulations do not mention volunteers. A regulation interpretation related to volunteers providing direct care can be found on page 16-1 of the Regulation Interpretation Manual.

In the September-October 1998 issue of *Geriatric Nursing*, there is an excellent article on enhancing feeding abilities in residents with dementia. Some of the principles stated in this article are appropriate for other populations who have difficulty with the activity of eating.

- Minimize distractions and interruptions during meals
- Avoid overstimulation during meals
- Use verbal prompts, praise, touch and positive reinforcement
- Provide food that is palatable and easy to manipulate
- Avoid mixing foods together
- Allow sufficient time for meals
- Minimize barriers by opening packages, unwrap food, cut food into small pieces
- Provide utensils which the resident can use independently

Staff who are not health care professionals or nurse aides can be involved in the dining experience. Staff can sit with a group of residents and through prompting encourage them to eat. Residents often will respond to individual attention during the task of eating. Licensed nurses must determine that these residents are not high risk for problems related to eating. It has been observed that staff stopping to talk with a resident who is not eating will often stimulate the resident to feed themselves.

A restorative feeding program can be of benefit for some residents. The article mentioned above contains an assessment tool to determine the ability to self-feed. Determining why the resident is not self-feeding is very important. Feeding one-self is a late skill loss. Often, residents who have not been self-feeding for a period of time can relearn the skill. Too often, it is thought to be easier to "feed" the resident instead of exploring ways the resident can continue to perform this skill.

Repositioning of Residents at Night

At the September joint provider/surveyor training on incontinence, Cheryl Mullin discussed the issue of awakening residents every two hours at night for repositioning and checking for dryness. Ms. Mullins stated that many residents experience sleep deprivation if they were unable to have at least five hours of uninterrupted sleep. In order to avoid this problem, research has shown that using an adult absorbent brief at night for residents who are incontinent may be an appropriate intervention. The decision to use an absorbent brief must be based on the results of a skin assessment and the resident's degree of risk for skin breakdown. It was also stated that shifts of a resident's body off a bony prominence maybe as effective as turning the resident side to side. Ms. Mullins emphasized that the decision to use the briefs or to use body shifts must be based on the resident's level of risk for skin breakdown. Therefore, facilities may choose to use these interventions with residents who are incontinent, but do not score as being at high risk for skin breakdown on a standardized skin assessment. As with any intervention, facility staff must assess the effectiveness of the intervention for

each individual resident.

Bureau of Health Facilities Staff

The listing below was developed to assist providers in reaching the appropriate staff person when they call the bureau. Please provide this listing to your staff.

<p>Licensure and Certification Program</p> <p>Medicare certification and change of ownership, change of resident capacity</p> <p>Licensure, letters of intent, licensure forms, change of ownership, change of administrator</p>	<p>Charles Moore (785) 296-1263; cmoore@kdhe.state.ks.us</p> <p>Rita Bailey (785) 296-1259; rbailey@kdhe.state.ks.us</p>
<p>Long Term Care Program</p> <p>Policies and regulations related to the operation of nursing facilities, LTC units in hospitals, assisted living/residential health care facilities, home plus, adult day care, home health agencies and hospice</p> <p>Resident Assessment Instrument (RAI) and Outcomes and Assessment Information Set, training schedule for MDS, RAP's and care-planning, (OASIS). Questions related to who can complete the MDS and OASIS, submission schedules and clarification of operational definitions of assessments items</p> <p>Standards of practice for nutrition and hydration of patients and residents, sanitation and organization of kitchens in health care facilities, survey process related to nutrition, hydration and sanitation. Questions related to the practice of licensed dietitians and dietary managers.</p> <p>Questions related to the physical environment of current and proposed health care facilities, change in the use of a required room or area</p>	<p>Patricia Maben, (785) 296-1240 pmaben@kdhe.state.ks.us</p> <p>Anita Hodge, (785) 296-4222 ahodge@kdhe.state.ks.us</p> <p>Sandra Dickison, (785) 296-1245 sdickison@kdhe.state.ks.us</p> <p>Lyle Adams, (785) 296-1247 ladams@kdhe.state.ks.us</p>
<p>Mental Health/Residential Facility Program</p> <p>Nursing facilities for Mental Health, Intermediate Care facilities for the Mentally Retarded, Assisted Living/Residential Health Care facilities, Home Plus, Boarding Care facilities, and Adult Day Care issues related to surveys</p>	<p>Gary Ingenthron or Joleen Morris (785) 296-1253 (Gary) (785) 296-1269 (Joleen) gingenthron@kdhe.state.ks.us jmorris@kdhe.state.ks.us</p>

<p>Health Occupations Credentialing</p> <p>Adult care home administrators, dietitians, speech language pathologists, audiologists initial license, license renewal, reinstatement and verification</p> <p>Health Occupations Credentialing Act</p> <p>Nurse Aide training courses, sponsorship programs, course approvals, continuing education approval for licensees</p> <p>Test scheduling for nurse aides or challenging a nurse aide test with higher education</p> <p>Medication aides</p> <p>Instructor approval/aide courses, interstate or reciprocity for aides</p> <p>Test for adult care home administrators, education policies</p> <p>Criminal background check program</p>	<p>Brenda Nesbitt, (785) 296-0061 bnesbitt@kdhe.state.ks.us</p> <p>Marla Rhoden, (785) 296-6647 mrhoden@kdhe.state.ks.us</p> <p>Dolores Staab, (785) 296-6796 dstaab@kdhe.state.ks.us</p> <p>Betty Domer, (785) 296-1250 bdomer@kdhe.state.ks.us</p> <p>Jennifer Amarin, (785) 296-0060 jamarin@kdhe.state.ks.us</p> <p>Fran Breedlove, (785) 296-0059 (after 3:00 pm)fbreedlo@kdhe.state.ks.us</p> <p>Martha Ryan, (785) 296-0058 mryan@kdhe.state.ks.us</p> <p>Steve Irwin, (785) 296-8628 sirwin@kdhe.state.ks.us</p>
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Credentialing Update

CMA Curriculum and Test Development. Work is progressing on the curriculum and tests for the medication aide course. The first draft of the curriculum is targeted for completion in December 2000. The first draft of the test questions is ready for review by the test development committee. The curriculum development committee will be suggesting revisions to the regulations, policies and procedures for medication aides. If you have comments or suggestions, please send them to Martha Ryan, HOC, 900 S.W. Jackson, Suite 1051 S, Topeka, Kansas, 66612 or to mryan@kdhe.state.ks.us.

Nurse Aide Instructor Manual. As of November 2000, a revised instructor manual is available for those who teach the nurse aide course. If you would like a copy, please contact Martha Ryan (785-296-0058 or mryan@kdhe.state.ks.us) or Fran Breedlove (785-296-0059 or fbreedlo@kdhe.state.ks.us).

Feedback on CNA Bridge Course for PTA/OTA. In order to improve services provided to our customers, Health Occupations Credentialing (HOC) maintains a **Quality Assurance Council (QAC)**. QAC reviews quality indicators as well as investigates and responds to complaints. Complaints may be submitted by and directed toward a variety of individuals, including those credentialed by HOC, instructors and/or sponsors of nurse aide training approved by HOC, and HOC staff. In addition to QAC, HOC established the **HOC Advisory Group** to assist in identifying issues of interest to both KDHE and the long-term care industry. One of the initiatives identified and subsequently addressed by the Advisory Group was the need for a bridge course allowing physical therapist assistants and occupational therapy assistants to meet the requirements to be a nurse aide.

Employment Verification Requests to be Mailed January 2001. To comply with federal regulation 42 C.F.R. 483.156(b)(3), the Bureau of Health Facilities, Health Occupations Credentialing Unit (HOC) is required to determine whether certified nurse aides have had a lapse of employment of more than 24 consecutive months. Effective January 1998, employment verification reporting was required on an annual basis. The reporting process will continue to be coordinated through Health Occupations Credentialing.

It is to the advantage of each facility/agency to provide the employment verification information for each **certified nurse aide/home health aide/certified medication aide** employed for at least 8 hours during the last 12 months (January 1, 2000 through December 31, 2000). In January 2001 Health Occupations Credentialing will be sending out a letter requesting the employment verification information be submitted. The deadline for this report to be submitted will be noted in the letter.

Do you know of 42 CFR 483.152 (c)? Federal regulations specifically prohibit charging Nurse Aide Training Competency Evaluation Program training costs to any nurse aide who is employed by or received an offer of employment from a facility. This means that if a facility hires a person, and that person must take a nurse aide course in order to be employed, the facility must pay the cost of the course. Several incidents have been documented where aides were charged for the training. Included were contracts or agreements for extended reimbursement payment plans, payroll deduction plans, or "scholarships." If the nurse aide terminated their employment within a specified time, a portion or all of the training "awarded" was required to be paid back. Regulatory enforcement options may include imposing a restriction on facility-based training. Certified nursing facilities may not enter into contractual arrangements which require nurse aides to pay or pay back training costs under any conditions.

Employment Agencies Must Provide Proof that Criminal Background has been Checked. The law which requires adult care homes to perform criminal background checks on individuals applying for employment has an addition provision that is quite important in these times of staffing shortages. Subsection (d) states ". . . [f]or the purpose of complying with this section, the operator of an adult care home **shall receive from any employment agency which provides employees to work in the adult care home written certification that such employees are not prohibited** from working in the adult care home under this section." Since the law became effective, on July 1, 1998, there has been an average of five new staffing agencies each year submitting individuals for criminal background checks. Recently there has been a significant increase in the number of staffing agencies submitting background checks. Since July of this year, 11 new staffing agencies have submitted criminal background checks, more than double the previous two years. Adult care home operators are reminded to **request the required documentation** when using agency staff.

Changed Form. The criminal background check request form was changed earlier this year. Additional job classifications were added, based on information provided by the industry. There also is an area which may be used for employment verification, to update an individual's certification. By completing the employment verification section an individual receives two years eligibility from the date the form is signed. These forms may be obtained by calling (785)296-0056 or they may be obtained from the HOC website at: www.kdhe.state.ks.us/hoc.

Resources for Quality Care

- *Preventing Heel Breakdown*

Graff, M., Bryant, J., and Beinlich, N. (2000) "Preventing Heel Breakdown", Orthopedic Nursing, 19(5), 63-69.

The prevalence of heel ulcers has increased while the prevalence of sacral ulcers has decreased. Nurses can have a positive impact on resident outcomes by initiating interventions to prevent heel ulcer development in at-risk residents. This article discusses the etiology, intrinsic and extrinsic factors related to heel ulcer development. Assessment for heel ulcer and interventions are also discussed.

- A Guide to Bed Safety: Bed Rails in Hospitals, Nursing Homes and Home Health Care: The Facts is a publication developed by the Hospital Bed Safety Workgroup. A copy of the publication can be obtained by calling Mary Scharf

at 610-388-558 or by Email: mscharf@kcorp.kendal.org.

- The Centers for Disease Control and Prevention has posted on its Web site an interactive training program on Hepatitis C for health professionals. The program provides users with up-to-date information on the epidemiology, diagnosis, and management of hepatitis C infection and related chronic disease. The training course is at <http://www.cdc.gov/ncidod/diseases/hepatitis>.
- 2001 Infection Prevention and Control Course

KDHE and the Kansas Hospital Association, in cooperation with members of the Association for Professionals in Infection Control and Epidemiology, Wichita, Kansas City, and Heart of America Chapters will present a two day course on infection control in health care settings. Strategies for implementing infection prevention and control programs will be presented. The course will be offered on March 6 and 7, 2001 in Hutchinson. Staff who are responsible for infection prevention and control in nursing facilities, assisted living/residential health care facilities, home plus, adult day care, long term care units in hospitals, home health agencies, and hospice are the intended audience. For additional information, contact the Kansas Hospital Association at (785) 233-7436.

ANE ISSUE STATISTICS 9/1/00 to 11/30/00
Hotline Calls Assigned for Investigation

<u>ANE Investigations</u>		<u>Care Issues Investigated</u>	
Total	496	Total	348
Sept	166	Sept	348
Oct	188	Oct	119
Nov	142	Nov	102

*Licensure Category	Correction Orders 2000 Quarters			
	1 st	2 nd	3 rd	4 th
Inadequate or inappropriate hygiene and skin care	2	6	3	
Inadequate or unqualified staffing	4	1	2	
Inappropriate or unauthorized use of restraints	0	2	0	
Unsafe medication administration or storage	2	9	2	
Inadequate nursing services other skin care	2	1	2	
Inadequate or inappropriate asepsis technique	0	0	1	
Inadequate or inappropriate dietary/nutritional services	6	1	1	
Unsafe storage or hazardous or toxic substances	1	0	0	
Resident right violations	7	5	0	
General sanitation and safety	3	1	1	
Other:			0	
ANE issues			7	
Inappropriate admissions			2	
Resident Functional Capacity Screen			4	
Negotiated Service Agreement			9	
Health Care Services			6	
Inadequate rehabilitation services	1	0	0	
Civil Penalties	0	1	3	
Correction Orders	11	17	19	
Bans on Admission	4	10	9	

*A correction order or civil penalty may consist of multiple issues summarized within the licensure categories above.

FEDERAL REMEDIES -CATEGORIES 2 & 3 - 2000 Quarters

	1st	2nd	3rd	4th
Civil Monetary Penalties Recommended	18	3	10	
Denial of Payment for New Admissions Imposed	27	21	31	
Terminations	0	0	1	
NOTC	33	20	31	

Kansas Department of Health and Environment

RAI Training

Below is the training schedule for RAI classes offered by KDHE. This training is provided at no cost to staff of nursing facilities, Medicare/Medicaid certified LTC units or hospitals and critical access hospitals participating in the swing bed program.

Training	Site	Date
1. RAPS and Care Plan Training	Kaw Area Tech School, Topeka	Tuesday, January 9, 2001 9:00 am to 3:00 pm
2. MDS Training	Kaw Area Tech School, Topeka	Wednesday, January 24, 2001 9:00 am to 4:00 pm
3. MDS Training	Emporia State University, Emporia	Thursday, February 22, 2001 9:00 am to 4:00 pm
4. MDS Training	Butler Co Community College, El Dorado	Wednesday, March 7, 2001 9:00 am to 4:00 pm
5. MDS Training	Kaw Area Tech School, Topeka	Tuesday, March 13, 2001 9:00 am to 4:00 pm
6. MDS Training	Kaw Area Tech School, Topeka	Wednesday, April 4, 2001 9:00 am to 4:00 pm
7. RAPs and Care Plan Training	Kaw Area Tech School, Topeka	Tuesday, May 8, 2001 9:00 am to 3:00 pm
8. RAPs and Care Plan Training	Butler Co Community College, El Dorado	Wednesday, June 6, 2001 9:00 am to 3:00 pm
9. MDS Training	Kaw Area Tech School, Topeka	Wednesday, June 20, 2001 9:00 am to 4:00 pm

*******Enrollment Form*******

Name, Position

1. _____

2. _____

Facility_____

Address and Zip Code_____

Phone Number (very important) Work: (_____) Home: (_____)

Please enroll us for the training scheduled on _____ located at _____
(date) (town)

Please mail enrollment form to:

**RAI Training
Bureau of Health Facilities
Kansas Department of Health and Environment
900 SW Jackson, Suite 1001
Topeka KS 66612-1220**